

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, to submits for filing a certificate of Assumed E Please type or print legibly. NOTE: See instructions on reverse before	S NAME the undersigned Business Name.
The assumed business name which the unbusiness is:	
Career (Connection
The true name(s) and business address(es business under the assumed business name	
Name	Complete Address
Jennie R. Fullmer	4290 Birchwood Circle
	Idaho Falls
	Idaho, 83406
Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
. Name and address for this acknowledgme copy is (if other than # 4 above):	nent Phone number (optional): 208-552-9930
	Secretary of State use only
nature:	1DAHO SECRETARY OF STA 1DAHO SECRETARY OF STA 103/02/2004 05 CK: 3803 CT: 158010 BH: 1

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